





PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to:

Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block I)

7590

01/25/2002

ZYMOGENETICS INC 1201 EASTLAKE AVENUE EAST SEATTLE, WA 98102



Note: The certificate of mailing below can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Malling
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Amy Toman	(Depositor's name)
	(Signature)
4/24/02	(Date)

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			CONFIRMATION NO.		
09/457,066	12/07/1999		ZEREN GAO		ATTORNEY DOCKET NO. 98-60	7262		
ITILE OF INVENTION	S: GROWTH FACTOR	HOMOLOG ZVEGF3						
TOTAL CLAIMS	APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FE	E TOTAL FEE(S) DUE	DATE DUE		
26	nonprovisional	NO	\$1280	\$0	\$1280	04/25/2002		
EXA	MINER	ART UNIT	CLASS-SUBCLAS	s				
ЛАМ	G, DONG	1646	435-069100					
1. Change of correspon	dence address or indicat	ion of "Fee Address" (37	2. For printing on	the patent front pag	e. list (1)			
but not required.	O Idim(s) and Customer	Number are recommende	the names of up to	3 registered patent ematively, (2) the n	attorneys Co 2017	E. Parker		
U Change of correspo	ndence address (or Char B/122) attached.	age of Correspondence	single firm (havin	oz as a member a	registered			
			attorney or agent)	and the names of torneys or agents. If	up to 2 2			
PTO/SB/47) attached	cation (or "Fee Address"	Indication form	is listed, no name v	vill be printed.	no name 3			
. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	HE PATENT (resist on to					
PLEASE NOTE: Unles	s an assignce is identifi	ed below, no assignee date	a will appear on the nate	pc) nt Inclusion of serio	mee data is cally assessmint			
(A) NAME OF ASSIGN	ted to the USPTO or is b	eing submitted under sepa	rate cover. Completion o	f this form is NOT a	mee data is only appropriate substitute for filing an assign	ment.		
,			RESIDENCE: (CITY ar	M STATE OR COUN	VTRY)			
/ ZymoGe	netics, In	C .	Seattle,	WA				
•								
terra check the communi	into and many automorphism				•			
		categories (will not be pri		U individual XI co	rporation or other private gro	oup entity U government		
a. The following fee(s) a	are enclosed:		4b. Payment of Fee(s):					
10 Issue Fee			☐ A check in the amount of the fee(s) is enclosed.					
☐ Publication Fee	_		☐ Payment by credit card. Form PTO-2038 is attached.					
M Advance Order ~ # or	f Copies 9	10 T Deg	10 The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $\frac{2.6 - 0.290}{2.6 - 0.290}$ (enclose an extra copy of this form).					
ppircation injunities and	OF PATENTS AND TRA	ADEMARKS is requested	to apply the Issue Fee an	d Publication Fee (if	any) or to re-apply any prev	iously paid issue fee to the		
Authorized Signature)	Tas las	(Date) / 24	1/02	AE /AQ /2002 CMT	NASS2 00000040 26029	0 09457066		

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (REV. 07-01) Approved for use through 01/31/2004. OMB 0651-0033

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, United States Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

1280.00 CH

27.00 CH

01 FC:142

02 FC:561